AO 440 (Rev. 8/01) Summons in a Civil Action			
United St	ATES DIS	TRICT C	COURT
	District of		MASSACHUSETTS
JOSEPH PETER SCHMITT			
v.		SUMMO	ONS IN A CIVIL ACTION
ROBERT MURPHY, et al			
	CASE	NUMBER:	05cv11348NG
TO: (Name and address of Defendant)	Timoto One I	hy Ha	11 Orive, Oldg. A.
	Nortal	k, Ma.	02056
YOU ARE HEREBY SUMMONED and	required to serve	on PLAINTI	FF'S ATTORNEY (name and address)
	Joseph	P. Sc	houtt
	30 Ad1	ninistm.	hmitt tion Road
	Bridge	vater y	massachusetts
		1-3230	
an answer to the complaint which is served on you of this summons on you, exclusive of the day of set for the relief demanded in the complaint. Any an Clerk of this Court within a reasonable period of	rvice. If you fail swer that you se	to do so, judg	• •
SARAH A. THORNTON			6/23/2006

DATE

/s/ JENNIFER FILO

CLERK

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF Joseph	P. Schmi	H s	FILED SLERKS OFF	ICE	COURT CASE NO		NG	_
DEFENDANT Robert	Murphy, e	+ Al. 7001	DEC 12 P	կ։ 02	TYPE OF PROCE	suts	Action	<u>-</u>
Timot	NDIVIDUAL, COMPANY Hy Hall Street or RFD, Apartmen	11.0	DISTRICT OF	тана	············		IZE OR CONDEM	N —
AT ONE IN	adustries Priv	e, Blog.,	A. Norte		4 020.	56		_
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:					Number of process to be served with this Form - 285			
Joseph P. Schmitt 30 Administration Road Badgewater, Mr. 02324				of parties to be n this case		5		
			1	Check for service on U.S.A.			_	
SPECIAL INSTRUCTIONS OR C Telephone Numbers, and Estimated Fold			IST IN EXPEDITING	SERVICE	(Include Business	and Alter		ii old
_)) SEP -5		_
				· · · · · · · · · · · · · · · · · · ·		T V		_
Signature of Attorney or other Original Control of the Control of	nator requesting service or	behalf of:	PLAINTIFF DEFENDAN		HONE NUMBER	35)	6
SPACE BELOW FOR	R USE OF U.S.	MARSHAI	ONLY — DO	O NOT	WRITE BE	LOW	THIS LIN	<u> </u>
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process District of Origin	District to Serve	Signature of Author	Λ			Date 9/5/	- 64
I hereby certify and return that I [] on the individual, company, corpora		-				-		=
☐ I hereby certify and return the	at I am unable to locate	the individual, cor	npany, corporation, e	etc., named	above (See remark	s below)		
Name and title of individual serve	ed (if not shown above)	ALIT			eretion t	n of suital hen residir ace of abo	ble age and dis- ng in the defendant ode.	's
Address (complete only if different	than shown above)				Date of Servi	VS. Mar	rshal or Deputy	am pm
					1.24	100	μ	_